

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

FACSIMILE COVER SHEET

Deliver to: Zachary Page, USPTOArt Group: 2835Facsimile No.: 203-872-9306Date: April 1, 2005From: William W. Schaal, Reg. No. 39,018Our Docket No.: 6639P012Number of pages 10, including this sheet.Application No.: 10/798,488Filing Date: 3/11/2004Docket Due Date(s): 4/1/2005

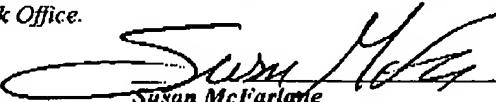
Enclosed are the following documents:

Amendment: Response (6 pgs)
 Appeal Brief (pgs)
 Application: (pgs) w/cover & abstract
 Assignment & Cover Sheet (pgs)
 Certificate of Facsimile
 Continued Prosecution Application (CPA)
 Declaration & POA (pgs)
 Drawings: sheets, figures
 Extension of Time:
 Fee Transmittal (in duplicate)
 IDS & PTO/SB/08 (pgs)
 Other

Issue Fee Transmittal
 Notice of Appeal
 Petition for:
 Request for Continued Examination (RCE)
 Reply Brief (pgs)
 Request & Certification Under 35 USC 122(b)(2)(B)(i)
 Request to Rescind Previous Nonpublication Request
 Response to Notice of Missing Parts & Formalities Letter
 Response to Written Opinion (pgs)
 Terminal Disclaimer
 Transmittal of Publication Fee Due
 Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

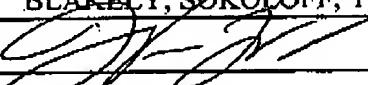

 Susan McFarlane
 4/1/2005
Date

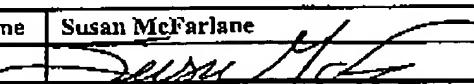
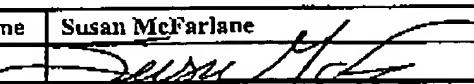
Confidentiality Note: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Susan McFarlane.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/798,488
		Filing Date	March 11, 2004
		First Named Inventor	Tomohiro Hamada
		Art Unit	2835
		Examiner Name	Zachary Pape
Total Number of Pages in This Submission	9	Attorney Docket Number	6639P012

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	April 1, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane 		
Signature		Date	April 1, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 06/04/2004.
SEND TO: Commissioner for Patents, P O Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>																									
<small>Patent fees are subject to annual revision.</small>		Application Number <u>10/798,488</u> Filing Date <u>March 11, 2004</u> First Named Inventor <u>Tomohiro Hamada</u> Examiner Name <u>Zachary Page</u> Art Unit <u>2835</u> Attorney Docket No. <u>6639P012</u>																									
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		TOTAL AMOUNT OF PAYMENT <u>(\$)</u> <u>0.00</u>																									
METHOD OF PAYMENT (check all that apply)																											
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																											
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>																											
<p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 5px;"> <input checked="" type="checkbox"/> Charge fee(s) indicated below </td> <td style="width: 50%; text-align: center; padding: 5px;"> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee </td> </tr> <tr> <td style="text-align: center; padding: 5px;"> <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) </td> <td style="text-align: center; padding: 5px;"> <input checked="" type="checkbox"/> Credit any overpayments </td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;"> <small>under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</small> </td> </tr> </table>				<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s)	<input checked="" type="checkbox"/> Credit any overpayments	<small>under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</small>																			
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee																										
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s)	<input checked="" type="checkbox"/> Credit any overpayments																										
<small>under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.</small>																											
FEE CALCULATION																											
1. EXTRA CLAIM FEES																											
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;"> <small>Total Claims</small> <small>Independent Claims</small> <small>Multiple Dependent</small> </td> <td style="width: 10%; text-align: center;"> <small>20</small> <small>5</small> <small></small> </td> <td style="width: 10%; text-align: center;"> <small>20*</small> <small>5*</small> <small></small> </td> <td style="width: 10%; text-align: center;"> <small>Extra Claims</small> <small></small> </td> <td style="width: 10%; text-align: center;"> <small>Fee from below</small> <small></small> </td> <td style="width: 10%; text-align: center;"> <small>Fee Paid</small> <small></small> </td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td style="text-align: center;"> <small>=</small> </td> <td style="text-align: center;"> <small>=</small> </td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td style="text-align: center;"> <small>50.00</small> <small>200.00</small> <small></small> </td> <td style="text-align: center;"> <small>\$0.00</small> <small>\$0.00</small> <small></small> </td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td style="text-align: center;"> <small>=</small> </td> <td style="text-align: center;"> <small></small> </td> </tr> </table>				<small>Total Claims</small> <small>Independent Claims</small> <small>Multiple Dependent</small>	<small>20</small> <small>5</small> <small></small>	<small>20*</small> <small>5*</small> <small></small>	<small>Extra Claims</small> <small></small>	<small>Fee from below</small> <small></small>	<small>Fee Paid</small> <small></small>					<small>=</small>	<small>=</small>					<small>50.00</small> <small>200.00</small> <small></small>	<small>\$0.00</small> <small>\$0.00</small> <small></small>					<small>=</small>	<small></small>
<small>Total Claims</small> <small>Independent Claims</small> <small>Multiple Dependent</small>	<small>20</small> <small>5</small> <small></small>	<small>20*</small> <small>5*</small> <small></small>	<small>Extra Claims</small> <small></small>	<small>Fee from below</small> <small></small>	<small>Fee Paid</small> <small></small>																						
				<small>=</small>	<small>=</small>																						
				<small>50.00</small> <small>200.00</small> <small></small>	<small>\$0.00</small> <small>\$0.00</small> <small></small>																						
				<small>=</small>	<small></small>																						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <small>Large Entity</small> </td> <td style="width: 50%; text-align: center;"> <small>Small Entity</small> </td> </tr> <tr> <td style="text-align: center;"> <small>Fee Code</small> <small>1202</small> <small>1201</small> <small>1203</small> <small>1204</small> <small>1205</small> </td> <td style="text-align: center;"> <small>Fee (\$)</small> <small>1.00</small> <small>200</small> <small>300</small> <small>300</small> </td> <td style="text-align: center;"> <small>Fee Code</small> <small>2202</small> <small>2201</small> <small>2203</small> <small>2204</small> <small>2205</small> </td> <td style="text-align: center;"> <small>Fee (\$)</small> <small>25</small> <small>100</small> <small>180</small> <small>150</small> <small>150</small> </td> <td style="text-align: center;"> <small>Fee Description</small> <small>Claims in excess of 20</small> <small>Independent claims in excess of 3</small> <small>Multiple Dependent claim, if not paid</small> <small>Release independent claims over original patent</small> <small>Multiple claims in excess of 20 and over original patent</small> </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <small>SUBTOTAL (1)</small> </td> <td colspan="2" style="text-align: center;"> <small>(\$)</small> </td> <td colspan="2" style="text-align: center;"> <small>0.00</small> </td> </tr> </table>				<small>Large Entity</small>	<small>Small Entity</small>	<small>Fee Code</small> <small>1202</small> <small>1201</small> <small>1203</small> <small>1204</small> <small>1205</small>	<small>Fee (\$)</small> <small>1.00</small> <small>200</small> <small>300</small> <small>300</small>	<small>Fee Code</small> <small>2202</small> <small>2201</small> <small>2203</small> <small>2204</small> <small>2205</small>	<small>Fee (\$)</small> <small>25</small> <small>100</small> <small>180</small> <small>150</small> <small>150</small>	<small>Fee Description</small> <small>Claims in excess of 20</small> <small>Independent claims in excess of 3</small> <small>Multiple Dependent claim, if not paid</small> <small>Release independent claims over original patent</small> <small>Multiple claims in excess of 20 and over original patent</small>	<small>SUBTOTAL (1)</small>		<small>(\$)</small>		<small>0.00</small>												
<small>Large Entity</small>	<small>Small Entity</small>																										
<small>Fee Code</small> <small>1202</small> <small>1201</small> <small>1203</small> <small>1204</small> <small>1205</small>	<small>Fee (\$)</small> <small>1.00</small> <small>200</small> <small>300</small> <small>300</small>	<small>Fee Code</small> <small>2202</small> <small>2201</small> <small>2203</small> <small>2204</small> <small>2205</small>	<small>Fee (\$)</small> <small>25</small> <small>100</small> <small>180</small> <small>150</small> <small>150</small>	<small>Fee Description</small> <small>Claims in excess of 20</small> <small>Independent claims in excess of 3</small> <small>Multiple Dependent claim, if not paid</small> <small>Release independent claims over original patent</small> <small>Multiple claims in excess of 20 and over original patent</small>																							
<small>SUBTOTAL (1)</small>		<small>(\$)</small>		<small>0.00</small>																							
2. ADDITIONAL FEES																											
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <small>Large Entity</small> </td> <td style="width: 50%; text-align: center;"> <small>Small Entity</small> </td> </tr> <tr> <td style="text-align: center;"> <small>Fee Code</small> <small>1031</small> <small>1052</small> <small>2053</small> <small>1251</small> <small>1252</small> <small>1253</small> <small>1254</small> <small>1255</small> <small>1401</small> <small>1402</small> <small>1403</small> <small>1451</small> <small>1460</small> <small>1807</small> <small>1808</small> <small>1809</small> <small>1810</small> </td> <td style="text-align: center;"> <small>Fee (\$)</small> <small>1.00</small> <small>60</small> <small>130</small> <small>120</small> <small>450</small> <small>1,020</small> <small>1,580</small> <small>2,180</small> <small>500</small> <small>500</small> <small>1,000</small> <small>1,510</small> <small>130</small> <small>50</small> <small>180</small> <small>700</small> <small>2810</small> </td> <td colspan="3" style="text-align: center;"> <small>Fee Description</small> <small>Surcharge - late filing fee or cash</small> <small>Surcharge - late provisional filing fee or cover sheet</small> <small>Non-English specification</small> <small>Extension for reply within first month</small> <small>Extension for reply within second month</small> <small>Extension for reply within third month</small> <small>Extension for reply within fourth month</small> <small>Extension for reply within fifth month</small> <small>Notice of Appeal</small> <small>Filing a brief in support of an appeal</small> <small>Request for oral hearing</small> <small>Petition to Institute a public use proceeding</small> <small>Petitions to the Commissioner</small> <small>Processing fee under 37 CFR 1.17(q)</small> <small>Submission of Information Disclosure Stmt</small> <small>Filing a submission after final rejection (37 CFR § 1.120(a))</small> <small>For each additional invention to be examined (37 CFR § 1.120(b))</small> </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <small>Other fee (specify)</small> </td> <td colspan="2" style="text-align: center;"> <small>SUBTOTAL (2)</small> </td> <td colspan="2" style="text-align: center;"> <small>Fee Paid</small> </td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2" style="text-align: center;"> <small>(\$)</small> </td> </tr> </table>				<small>Large Entity</small>	<small>Small Entity</small>	<small>Fee Code</small> <small>1031</small> <small>1052</small> <small>2053</small> <small>1251</small> <small>1252</small> <small>1253</small> <small>1254</small> <small>1255</small> <small>1401</small> <small>1402</small> <small>1403</small> <small>1451</small> <small>1460</small> <small>1807</small> <small>1808</small> <small>1809</small> <small>1810</small>	<small>Fee (\$)</small> <small>1.00</small> <small>60</small> <small>130</small> <small>120</small> <small>450</small> <small>1,020</small> <small>1,580</small> <small>2,180</small> <small>500</small> <small>500</small> <small>1,000</small> <small>1,510</small> <small>130</small> <small>50</small> <small>180</small> <small>700</small> <small>2810</small>	<small>Fee Description</small> <small>Surcharge - late filing fee or cash</small> <small>Surcharge - late provisional filing fee or cover sheet</small> <small>Non-English specification</small> <small>Extension for reply within first month</small> <small>Extension for reply within second month</small> <small>Extension for reply within third month</small> <small>Extension for reply within fourth month</small> <small>Extension for reply within fifth month</small> <small>Notice of Appeal</small> <small>Filing a brief in support of an appeal</small> <small>Request for oral hearing</small> <small>Petition to Institute a public use proceeding</small> <small>Petitions to the Commissioner</small> <small>Processing fee under 37 CFR 1.17(q)</small> <small>Submission of Information Disclosure Stmt</small> <small>Filing a submission after final rejection (37 CFR § 1.120(a))</small> <small>For each additional invention to be examined (37 CFR § 1.120(b))</small>			<small>Other fee (specify)</small>		<small>SUBTOTAL (2)</small>		<small>Fee Paid</small>						<small>(\$)</small>						
<small>Large Entity</small>	<small>Small Entity</small>																										
<small>Fee Code</small> <small>1031</small> <small>1052</small> <small>2053</small> <small>1251</small> <small>1252</small> <small>1253</small> <small>1254</small> <small>1255</small> <small>1401</small> <small>1402</small> <small>1403</small> <small>1451</small> <small>1460</small> <small>1807</small> <small>1808</small> <small>1809</small> <small>1810</small>	<small>Fee (\$)</small> <small>1.00</small> <small>60</small> <small>130</small> <small>120</small> <small>450</small> <small>1,020</small> <small>1,580</small> <small>2,180</small> <small>500</small> <small>500</small> <small>1,000</small> <small>1,510</small> <small>130</small> <small>50</small> <small>180</small> <small>700</small> <small>2810</small>	<small>Fee Description</small> <small>Surcharge - late filing fee or cash</small> <small>Surcharge - late provisional filing fee or cover sheet</small> <small>Non-English specification</small> <small>Extension for reply within first month</small> <small>Extension for reply within second month</small> <small>Extension for reply within third month</small> <small>Extension for reply within fourth month</small> <small>Extension for reply within fifth month</small> <small>Notice of Appeal</small> <small>Filing a brief in support of an appeal</small> <small>Request for oral hearing</small> <small>Petition to Institute a public use proceeding</small> <small>Petitions to the Commissioner</small> <small>Processing fee under 37 CFR 1.17(q)</small> <small>Submission of Information Disclosure Stmt</small> <small>Filing a submission after final rejection (37 CFR § 1.120(a))</small> <small>For each additional invention to be examined (37 CFR § 1.120(b))</small>																									
<small>Other fee (specify)</small>		<small>SUBTOTAL (2)</small>		<small>Fee Paid</small>																							
				<small>(\$)</small>																							

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (WIR) 12/13/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	10/798,488
Filing Date	March 11, 2004
First Named Inventor	Tomohiro Hamada
Examiner Name	Zachary Page
Art Unit	2835
Attorney Docket No.	6639P012

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	20	- 20*	=	0	x	50.00	=	\$0.00
Independent Claims	5	- 5*	=	0	x	200.00	=	\$0.00
Multiple Dependent								

Large Entity

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

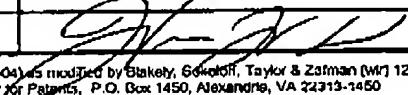
Large Entity

Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1061	130	2051	65	Surcharge - late filing fee or oath
1062	60	2052	25	Surcharge - late provisional filing fee or cover sheet
2063	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	260	Filing a brief in support of an appeal
1403	1,000	2403	600	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1007	50	Processing fee under 37 CFR 1.17(q)
1806	180	1006	180	Submission of Information Disclosure Stmt
1809	790	1009	385	Filing a submission after final rejection (37 CFR § 1.129(b))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.120(b))
Other fee (specify)		SUBTOTAL (2)		(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type)	William W. Schaeff	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800	
Signature					Date	04/01/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (W) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 10/798,488
Amdt. Dated 04/01/2005
Reply to Office Action of February 1, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. :	10/798,488	Confirmation No. 6291
Applicant :	Tomohiro Hamada	
Filed :	03/11/2004	
TC/A.U. :	2835	
Examiner :	Zachary Pape	
Docket No. :	006639.P012	
Customer No. :	8791	

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of February 1, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.